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- i) Less expensive transportation alternatives
 - ii) Non-hospital ED clinical providers, free standing emergency clinics, etc.
 - c. Advocating citizen involvement in the EMS system
 - (1) Improves EMS system
 - (a) Involvement in establishing needs, parameters
 - (b) Outside, objective view into quality improvement and problem resolution
 - (c) Creates informed, independent advocates for the EMS system
 - G. Importance of EMS research
 - 1. Benefits of research
 - 2. Quality EMS research is beneficial to the future of EMS
 - a. Changes in professional standards, training, equipment, procedures
 - b. Based on empirical data, rather than “great ideas” or “new gadget” models
 - 3. Enhances recognition and respect for EMS professionals
- III. Medical direction
 - A. Many services provided by EMT-Intermediates are derived from medical practices
 - B. EMT-Intermediates operate as “physician extension”
 - C. Physicians regarded as the authorities on issues of medical care
 - 1. **State Emergency Medical Advisory Committee establishes minimum statewide standards, reviews and approves regional protocols.**
 - 2. **Regional Emergency Medical Advisory Committee develops regional treatment protocols, credentials ALS providers and Medical Control physicians, and provides quality improvement activities.**
 - D. Physicians, properly educated and motivated, are a vital component of EMS
 - E. Role of the EMS physician in providing medical direction
 - 1. Education and training of personnel
 - 2. Participation in personnel selection process
 - 3. Participation in equipment selection
 - 4. Development of clinical protocols, in cooperation with expert EMS personnel
 - 5. Participation in quality improvement and problem resolution
 - 6. Provides direct input into patient care
 - 7. Interfaces between EMS systems and other health care agencies
 - 8. Advocacy within the medical community
 - 9. Serve as the “medical conscience” of the EMS system
 - a. Advocate for quality patient care
 - 10. Types of medical direction
 - a. On-line/ direct (**medical control**)
 - b. Off-line/ indirect (**protocols**)
 - F. Benefits of medical direction
 - 1. On-line
 - a. Immediate and patient specific care
 - b. Telemetry
 - c. Continuous quality improvement
 - d. On-scene
 - 2. Off-line
 - a. Prospective (**REMAC**)
 - (1) Development of protocols/ standing orders, training

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(d) Denial
(e) Feeling overwhelmed

(3) VZIG (Varicellular Immune Globulin)

[illegible]

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